

## **Non-Opioid Alternatives for Pain Management**

There is an epidemic of opioid deaths in the United States with the number of deaths from opioid overdose exceeding those from suicides or auto accidents.<sup>1</sup> Over half of opioid overdose deaths are related to medications obtained legally through a prescription.<sup>2</sup> Excessive opioid prescribing (higher than needed quantity), high-dose prescriptions and chronic use increase the risk for opioid dependency, overdose and death.

Several studies fail to show the benefits of long-term opioid therapy; and the first and only long-term study (> 12 months) evaluating opioid versus non-opioid therapies for chronic pain found no evidence of opioid superiority for either function or pain intensity.<sup>3</sup> The Centers for Disease Control Guidelines for Prescribing Opioids for Chronic Pain recommend non-opioid analgesics, antidepressants and anti-seizure medications for the treatment of some forms of chronic pain.<sup>4</sup>

Utah Medicaid supports these guidelines and encourages providers to engage in prescribing patterns that support evidence-based safety standards.

The Utah Medicaid Preferred Drug List (PDL) has a variety of recommended, non-opioid treatment options for pain available for Utah Medicaid members, and many are available as a 90 day supply. Some classes of drugs to consider include:

- NSAIDs
- Antidepressant SSRI/SNRI
- Antihypertensives (migraine prophylaxis)
- Anticonvulsants (migraine prophylaxis)
- Anticonvulsants (neuropathic pain)
- TCAs (neuropathic pain)
- Migraine Agents
- Local Anesthetic Agents
- Muscle Relaxants
- CGRP Inhibitors (migraine prophylaxis)
- Gout Agents

Please see for the most recent version of the Utah Medicaid PDL at <a href="https://medicaid.utah.gov/pharmacy/preferred-drug-list">https://medicaid.utah.gov/pharmacy/preferred-drug-list</a>

## References:

- Rudd R. 2016. Increases in drug and opioid overdose deaths United States, 2000-2014. Morbidity and Mortality Weekly Report (MMWR) 64(50);1378-82. <a href="https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6450a3.htm">https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6450a3.htm</a>. Accessed July 16, 2018.
- 2. Kolodny A. 2015. The prescription opioid and heroin crisis: A public health approach to an epidemic of addition. Annual Review Public Health 36:559-574, <a href="http://annualreviews.org/doi/pdf/10.1146/annurev-publhealth-031914-122957">http://annualreviews.org/doi/pdf/10.1146/annurev-publhealth-031914-122957</a>. Accessed July 18, 2018.
- 3. Krebs E, et al. 2017. Effectiveness of opioid therapy vs. non-opioid medication therapy for chronic back and osteoarthritis pain over 12 months: A pragmatic randomized trial. Washington DC: Society for General Internal Medicine.
- 4. CDC (Centers for Disease Control and Prevention). Guidelines for Prescribing Opioids for Chronic Pain. https://cdc.gov/drugoverdose/prescribing/guidelines.html.